Mr./Artist Seltzer, Phyllis
Permanent Address 11225 Harborview Pr. Cleveland Street City
44102 Daytime Tel. (216) 696-7597
Zip area
Temporary or Studio Address #408 1220 W. 6th St. Cleveland Street City
44113 Daytime Tel. (2/6) 696 - 7597 Zip area
Zip area
If you do not presently live in one of the counties of the Western Reserve, in which county were you born?
Collaborator (if any)
☐ Museum should ship to artist at artist's expense: Street
City State Zip
Special Instructions
Entry Blank must be completed in full and signed; forms received unsigned will not be accepted.
When necessary, include instructions or a drawing for assembling and displaying an object.
an object. Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until September 5, 1993. The submission of objects will be construed as an acceptance by the artist
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Entry Blanks

Detach entire portion along dotted line and submit with slides, but retain tags

A Specify □ Paint		ulpture aphics	☐ Craft	cs ography
Materials used (media):			
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Title Signif	icance 2			
Price or NFS #1,200.	Insurance Value if NFS Only			3 x 34 dth x depth
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